

PATIENT PRESENTING CLINICAL SIGNS

Rusty McVicar Wt loss 2 lbs, mild non regen anemia. HCT 29. No other clinical concerns.

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Feline Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal thickness and tone. Anechoic urine was present in the lumen with minor non-dependent particulate sediment. The sediment may indicate cellular debris / protein, crystalline debris, lipid, or mucus. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.

BREED DSH

SEX MN

AGE 14yr

Normal renal size with asymmetrical margination was present in both kidneys. The renal cortex presented uniformly increased in echogenicity with uniform echotexture. The renal cortex appeared to be hypertrophied resulting in an altered cortex: medulla ratio. Mild loss of corticomedullary distinction was also present. The renal medullary volume was subjectively reduced. The left kidney measured 4.7 cm in length. The right kidney measured 4.6 cm in length.

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

WEIGHT 12.75lb

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.40 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.33 cm width.

Spleen

The spleen exhibited mild enlargement with a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Potential mild medial folding of the caudal spleen was present. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. The spleen measured 1.3 cm in width at the level of the hilus.

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP (Canine and Feline)

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

HOSPITAL NAME

Pine Banks Animal Hospital

REFERRING VET

Dr. Syed

Liver

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. Intermittent discrete non-disruptive hypoechoic hepatic nodules were present, an example measuring 0.44-0.48 cm. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content with mild echogenic non-organized debris. No evidence of gallbladder or peripheral gallbladder inflammation was present. The cystic and common bile ducts were normal.

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material. The gastric body wall measured 0.25 cm in width.

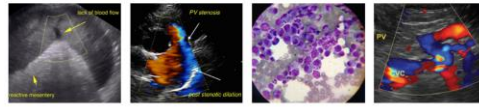
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DATE

12/05/2022

The small intestine presented intact segmentally prominent with mildly prominent muscularis and submucosa layer. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material. The jejunum wall measured 0.29 cm width. The ileocolic wall measured 0.28 cm width.



PATIENT

Rusty McVicar

The colon walls presented intact yet prominent wall layering with mild thickened to echogenic submucosa. Semi formed to soft fecal matter was present in the colon lumen with lumen dilation.

Pancreas

SPECIES

Feline

The pancreas presented hypoechoic to heterogeneous echogenicity compared to adjacent omental fat. Mild asymmetrical capsule margination was present with mild variable parenchymal swelling and mild peripancreatic reactivity / inflammation. No overt evidence of neoplasia.

BREED

DSH

Free Abdomen

Focally enlarged mid abdominal mesenteric lymph nodes were present exhibiting variable enlargement. These lymph nodes were homogenous, mildly hypoechoic and smoothly margined. A normal width:length ratio was maintained (<0.5). Evidence of perilymphatic hyperechoic mesentery was evident. An example of lymph node size was 2.2 cm x 1.2 cm. Intermittent small pocket of scant perisplenic to peri intestinal free fluid was present.

SEX

MN

ULTRASONOGRAPHIC FINDINGS

AGE

14yr

- Chronic interstitial nephrosis renal pattern
- Intermittent discrete non-specific hepatic nodules
- Mild gallbladder debris
- Mild splenomegaly-secondary to sedation if clinically applicable, hyperplasia, hematopoiesis, focal splenitis, small hematoma or similar suspected, potential for emerging neoplastic criteria thought less likely yet cannot be definitively excluded
- Enteropathy-IBD vs neoplastic infiltrative enteropathy with round cells
- Mild pancreatitis pattern
- Multiple hypoechoic to swollen mesenteric lymph nodes-lymphadenitis, concern for neoplastic lymphadenopathy warranted

WEIGHT

12.75lb

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

R. McKenzie Daniel, DVM,
DABVP (Canine and Feline)

Assuming normal clotting status and using a 25g needle, a lymph node and spleen FNA for screening cytology is warranted for further assessment. A GI panel to include PLI/TLI/Cobalamin/Folate is recommended. Pending FNA cytology, full thickness intestinal and lymphatic biopsies may be required for a definitive diagnosis. Three view chest radiographs are recommended if not done to assess for occult thoracic pathology. Recheck retroviral status is warranted

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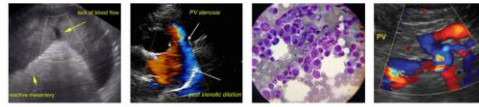
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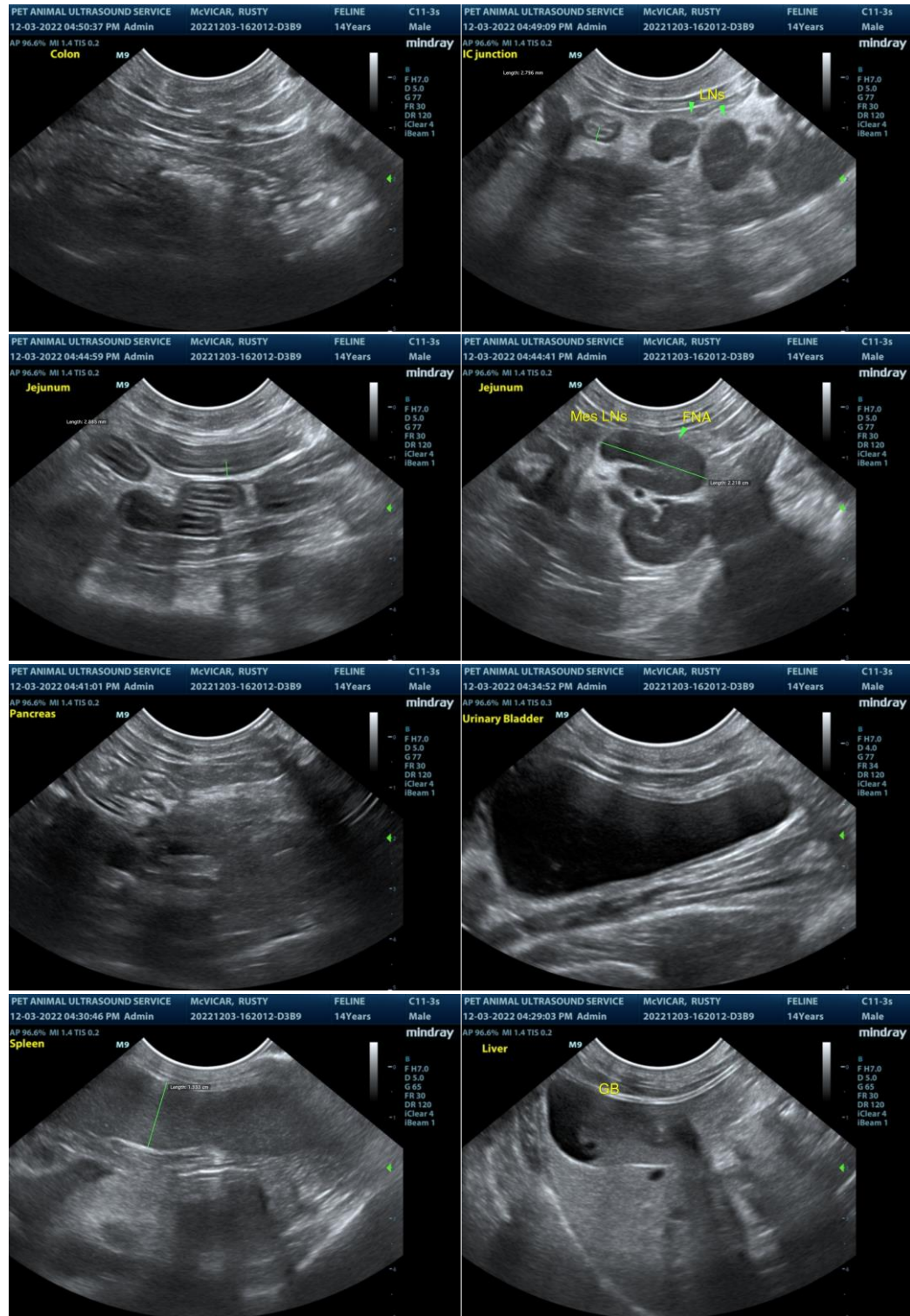
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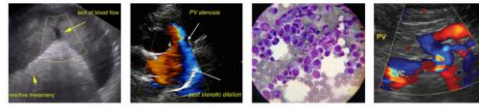
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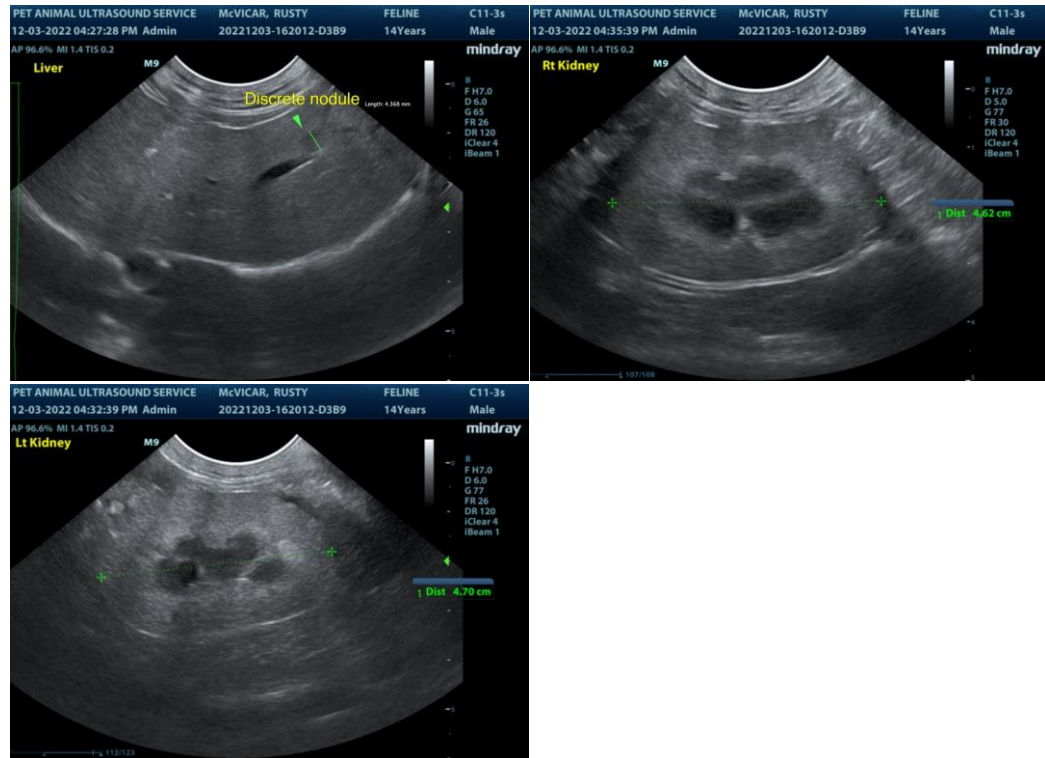
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

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